



# KUDA MOTOR THEFT CLAIM FORM

INSURED DETAILS			
Policy Holders Name		Policy Number	
Email Address			
Identity Number			
Phone Numbers	Work	Cell	
VEHICLE DETAILS			
Make		Year	
Model			
Km's Completed			
Reg. Number		Exterior Colour	
FINANCE DETAILS			
Name of Financed House			
Branch		Account Number	
Type of Agreement			
Owner Name			
Owner ID Number			
THEFT			
Date		Time	
Place			
Police Station reported to			
Case Number		Date Reported	
Reported by			
Circumstances (Was the vehicle locked? If not, give reasons)			

## KUDA HOLDINGS (PTY) LTD

BIG BAY OFFICE PARK, 2<sup>ND</sup> FLOOR, CORMORANT ROAD, BIG BAY 7441 | PO BOX 151, BLOUBERGSTRAND, 7441  
T 021 554 5832 | COMPANY REG 2008/018404/07 | VAT NUMBER 4570254054 | AUTHORISED FINANCIAL SERVICES & CREDIT PROVIDER | FSP 38382 | NCRCP 12527 | APPROVED LLOYD'S COVERHOLDER | PIN112897C.JS  
DIRECTORS: W SMITH, B KANTOR, G PUNT  
[WWW.KUDA.CO.ZA](http://WWW.KUDA.CO.ZA)

## INSURER:

INFINITI INSURANCE LIMITED  
BLOCK F UPPER GRAYSTON OFFICE PARK  
152 ANN CRESCENT STRATHAVON 2031  
T 011 505 0000 F 011 505 0001



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## THEFT (continued)

Details of stolen accessories (please attach invoices) are these separately insured?

ANTI-THEFT/ VEHICLE RECOVERY DEVICE DETAILS (please attached proof of this)

Make			
Fitted by		Date	

DETAILS OF WINDOW MARKINGS

Number		Applied by Whom	
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Details of scratches, dents defects

Details of other features which would assist identification

**PLEASE ATTACH THE VEHICLE KEYS, A COPY OF THE REGISTRATION CERTIFICATE AND THE LAST SERVICE INVOICE**

## DRIVERS LICENCE DETAILS

Due to the size and poor colouring of the driver's licence, in most cases we are unable to read the details. Please complete the following details only as stipulated on your driver's card licence. A copy of the driver's licence MUST still be attached.

Initial & Surname			
ID Number		Birth Date	
Licence Number		Code	
Vehicle Restriction			
Driver's Signature		Date	

## DECLARATION

We hereby declare the foregoing particulars to be true in every respect.

Signature of Driver (if different to insured)		Date	
Signature of Insured		Date	

It is important that you notify the insurers immediately you become aware of any impending prosecution, inquest, or demand. Any personal injuries noted overleaf must be reported separately to the road accident fund without delay.

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